

SCHOOL FACILITIES BOARD

SFB ADC-402-00

ASSESSMENT DEFICIENCY

District Request for Funds

District _____

CTD Number _____

ASSESSMENT DEFICIENCY PROJECT

Project Number _____	
Project Title _____	
Date of Final Board Action _____	
Base Cost Contingency Additional Cost Total Amount Requested	Fund 685 Deficiencies Correction Fund

District Representative_____
Date_____
Phone

School Facilities Board Staff:

Project: _____

Finance: John Arnold